

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Rethink PAC

ADDRESS (number and street) ▼

202 Bonham Rd

☐ Check if different than previously reported. (ACC)

Dedham

MA

02026

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00503870

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the
State of

M M M / D D D / Y Y Y Y Y Y

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the
State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

through

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David N Martin

Signature of Treasurer

David N Martin

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rethink PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y 11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		148811.33
(b) Cash on Hand at Beginning of Reporting Period.....	12604.80	
(c) Total Receipts (from Line 19)	1261613.40	1443475.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1274218.20	1592286.77
7. Total Disbursements (from Line 31)	1197200.09	1515268.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	77018.11	77018.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rethink PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
10 01 2012

To:

M M / D D / Y Y Y Y Y
11 26 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

961613.40

1092398.08

(ii) Unitemized

0.00

225.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

961613.40

1092623.08

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

300000.00

350000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

1261613.40

1442623.08

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

852.36

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

1261613.40

1443475.44

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

1261613.40

1443475.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	194369.71	512438.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	194369.71	512438.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1002830.38	1002830.38
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1197200.09	1515268.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1197200.09	1515268.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1261613.40	1442623.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1261613.40	1442623.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	194369.71	512438.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	852.36
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	194369.71	511585.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Joseph W Alsop

Mailing Address PO Box 76

16 Thissell ST

City

Prides Crossing

State

MA

Zip Code

01965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alsop Louie Partners

Occupation

Venture Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

10 / 05 / 2012

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period

6000.00

Full Name (Last, First, Middle Initial)

B. Joseph W Alsop

Mailing Address PO Box 76

16 Thissell ST

City

Prides Crossing

State

MA

Zip Code

01965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alsop Louie Partners

Occupation

Venture Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

56000.00

Date of Receipt

10 / 23 / 2012

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

C. Paul Egberman

Mailing Address 77 Westcliff Rd

City

Weston

State

MA

Zip Code

02493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nuance

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

10 / 05 / 2012

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period

6000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Paul Egernan

Mailing Address 77 Westcliff Rd

City

Weston

State

MA

Zip Code

02493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nuance

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

56000.00

Date of Receipt

10 / 29 / 2012

Transaction ID : SA11AI.4271

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

B. Henry H Goldberg

Mailing Address 7200 Wisconsin Ave Suite 1000

City

Bethesda

State

MD

Zip Code

33308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Artery Capital Group

Occupation

Chairman

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

10 / 29 / 2012

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Peter B Loring

Mailing Address 230 Congress ST

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Loring, Wolcott & Coolidge

Occupation

Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / 29 / 2012

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Massachusetts Teachers Association

Mailing Address 20 Ashburton Pl

City State Zip Code
Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380784.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2012

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period

250000.00

Full Name (Last, First, Middle Initial)

B. Massachusetts Teachers Association

Mailing Address 20 Ashburton Pl

City State Zip Code
Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630784.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11AI.4277

Amount of Each Receipt this Period

250000.00

Full Name (Last, First, Middle Initial)

C. Massachusetts Teachers Association

Mailing Address 20 Ashburton Pl

City State Zip Code
Boston MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636341.38

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.4298

Amount of Each Receipt this Period

5556.70

In-kind - Staff Time

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

505556.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Massachusetts Teachers Association

Mailing Address 20 Ashburton Pl

City
Boston

State
MA

Zip Code
02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641898.08

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.4308

Amount of Each Receipt this Period

5556.70

In-kind - staff time

Full Name (Last, First, Middle Initial)

B. Carol Master

Mailing Address 199 Coolidge Ave Apt 107

City

Watertown

State

MA

Zip Code

02472

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Vincent J Ryan

Mailing Address 10703 Charleston Dr

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schooner Capital LLC

Occupation

Founder and Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

6000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26556.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Vincent J Ryan

Mailing Address 10703 Charleston Dr

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schooner Capital LLC

Occupation

Founder and Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

56000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

B. SEIU PEA International

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period

250000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300000.00

961613.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 OF 19

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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Mailing Address 330 WEST 42ND STREET, 7TH FLOOR

City State Zip Code
NEW YORK NY 10036

FEC ID number of contributing
federal political committee.

C C00348540

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2012

Transaction ID : SA11C.4251

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

B. 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Mailing Address 330 WEST 42ND STREET, 7TH FLOOR

City State Zip Code
NEW YORK NY 10036

FEC ID number of contributing
federal political committee.

C C00348540

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11C.4260

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

C. 1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Mailing Address 330 WEST 42ND STREET, 7TH FLOOR

City State Zip Code
NEW YORK NY 10036

FEC ID number of contributing
federal political committee.

C C00348540

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11C.4287

Amount of Each Receipt this Period

150000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300000.00

300000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Alipes CME Inc

Mailing Address 175 Portland St, 5th Floor

City Boston State MA Zip Code 02114

Purpose of Disbursement
Website expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2012
Transaction ID : SB21B.4255

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Alipes CME Inc

Mailing Address 175 Portland St, 5th Floor

City Boston State MA Zip Code 02114

Purpose of Disbursement
Website expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2012
Transaction ID : SB21B.4256

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Alipes CME Inc

Mailing Address 175 Portland St, 5th Floor

City Boston State MA Zip Code 02114

Purpose of Disbursement
Internet expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2012
Transaction ID : SB21B.4296

Amount of Each Disbursement this Period

3750.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

33750.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 19

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. DiNicola, Seligson & Upton, LLP

Mailing Address 185 Devonshire St, Suite 902

City State Zip Code
 Boston MA 02110

Purpose of Disbursement
 Legal services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
 10 12 2012

Transaction ID : SB21B.4254

Amount of Each Disbursement this Period

554.17

Full Name (Last, First, Middle Initial)

B. DiNicola, Seligson & Upton, LLP

Mailing Address 185 Devonshire St, Suite 902

City State Zip Code
 Boston MA 02110

Purpose of Disbursement
 Legal services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
 11 02 2012

Transaction ID : SB21B.4291

Amount of Each Disbursement this Period

116.67

Full Name (Last, First, Middle Initial)

C. ETAIN LLC

Mailing Address 30 Stonleigh Cir

City State Zip Code
 Watertown MA 02472

Purpose of Disbursement
 Fundraising consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
 11 03 2012

Transaction ID : SB21B.4295

Amount of Each Disbursement this Period

53550.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54220.84

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Rethink PAC

A. Brian Farnkoff

Mailing Address 2005 13th St NW

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Research services

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4293

Amount of Each Disbursement this Period

330.00

Full Name (Last, First, Middle Initial)

B. Greenberg Quinlan Rosner Research

Mailing Address 10 G Street NE, Suite 500

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Polling expense

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.4257

Amount of Each Disbursement this Period

32700.00

Full Name (Last, First, Middle Initial)

C. Massachusetts Teachers Association

Mailing Address 20 Ashburton Pl

City	State	Zip Code
Boston	MA	02108

Purpose of Disbursement	
In-kind - Staff Time	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

The first grid shows the number 11, with 'M' in the top-left and top-right positions. The second grid shows the number 26, with 'D' in the top-left and top-right positions. The third grid shows the number 2012, with 'Y' in the top-left, top-right, middle-right, and bottom-right positions.

Transaction ID : SB21B.4299

Amount of Each Disbursement this Period

5556.70

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

38586.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 19

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Rethink PAC

Full Name (Last, First, Middle Initial)

A. Massachusetts Teachers Association

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		2	6		2	0	1	2		

Mailing Address 20 Ashburton Pl

City	State	Zip Code
Boston	MA	02108

Transaction ID : SB21B.4309Purpose of Disbursement
In-kind - staff time

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5556.70

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Elizabeth Morningstar

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		0	2		2	0	1	2		

Mailing Address 3 Hillary St

City	State	Zip Code
Boston	MA	02129

Transaction ID : SB21B.4292Purpose of Disbursement
Strategic consulting

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

57600.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

63156.70

TOTAL This Period (last page this line number only)..... ►

194249.71

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 19
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Rethink PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00503870 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 11 / 01 / 2012 </div>
Mailing Address 1077 E Sahara Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 59000.08 </div>
City Las Vegas	State NV	
Purpose of Expenditure Phonebank program	Category/ Type 	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Scott P Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 618808.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE.4283

Full Name (Last, First, Middle Initial) of Payee The Pivot Group		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 22 / 2012 </div>
Mailing Address 1720 I St NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 355907.84 </div>
City Washington	State DC	
Purpose of Expenditure Printing, postage and mailshop expenses	Category/ Type 	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Scott P Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 355907.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE.4261

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 414907.92 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David N Martin

[Electronically Filed]

Signature

Date

MM / DD / YYYY
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 19
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Rethink PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00503870 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">25</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2012</div> </div>
Mailing Address 1720 I St NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">155722.08</div>
City Washington	State DC	
Purpose of Expenditure Printing & Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott P Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Pivot Group		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">25</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2012</div> </div>
Mailing Address 1720 I St NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">48178.34</div>
City Washington	State DC	
Purpose of Expenditure Printing, postage & data processing	Category/ Type	Office Sought: <input type="checkbox"/> House State: <u>MA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Scott P Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">203900.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David N Martin

[Electronically Filed]

Signature

Date

12

 /

06

 /

2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 19
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Rethink PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00503870 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group		Date M M / D D / Y Y Y Y Y Y 10 / 30 / 2012
Mailing Address 1720 I St NW Suite 550		Amount 384022.04
City Washington	State DC	
Zip Code 20006	Transaction ID : SE.4280	
Purpose of Expenditure Printing & Postage	Category/ Type 	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Scott P Brown		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 384022.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date M M / D D / Y Y Y Y Y Y
Mailing Address		Amount
City	State	
Zip Code	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 	
Purpose of Expenditure	Category/ Type 	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 		

(a) SUBTOTAL of Itemized Independent Expenditures.....	384022.04
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1002830.38

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David N Martin

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature